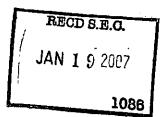
FORM D



UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB AP	がROVAL
OMB Number	3235-0076
Expires:	May 31, 2002
Estimated averag	
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07041	

			
Name of Offering(check if this is an amendment Riverside Investors, LLC	ent and name has changed, and indica	ite change.)	
	Rule 504 🔲 Rule 505 🔀 Rule	506 Section 4(6) ULOE	-
Type of Filing: New Filing Amend	lment		
	A. BASIC IDENTIFICAT	ION DATA	
1. Enter the information requested about the iss	suer		
Name of Issuer (check if this is an amen	ndment and name has changed, and ind	licate change.)	
Riverside Investors, LLC			
Address of Executive Offices (Numbe	er and Street, City, State, Zip Code)	Telephone Number (Including Area Code)	PPOCEOCE
c/o WexTrust Capital, 333 West Wacker	Drive, Suite 1600, Chicago,	(312) 332-4380	PROCESSE
Illinois 60606			S JAN 2 E 2007
Address of Principal Business Operations (Number	er and Street, City, State, Zip Code)	Telephone Number (Including Area Code)	JANA S 3 SOUL
(if different from Executive Offices)		/	THOMSON
Brief Description of Business .			FINANCIAL
Acquire, operate, sell, refinance, mortga	age and otherwise use and own	for profit a stable, high-profile, arc	hitecturally and
historically significant office/retail prope			· ·
Type of Business Organization			
corporation	limited partnership, already formed	other (please specify)	:
☐ business trust ☐	limited partnership, to be formed	limited liability	company
Actual or Estimated Date of Incorporation or Orga Jurisdiction of Incorporation or Organization: (E.			
GENERAL INSTRUCTIONS			
Federal:			

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq: or 15:U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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	A. BASIC IDEN	TIFICATION DATA		
2. Enter the information requested for the follow	owing:			
Each promoter of the issuer, if the issu	er has been organized with	nin the past five years;		
 Each beneficial owner having the pow of the issuer; 	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	of a class of equity securities
Each executive officer and director of	corporate issuers and of co	orporate general and manag	ging partners of pa	rtnership issuers; and
 Each general and managing partner of 	partnership issuers.			
Check Box(es) that Apply: Promoter	■ Beneficial Owner	☐ Executive Officer	Director	Managing Member
Full Name (Last name first, if individual)				
Byers, Steve				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		
333 West Wacker Drive, Suite 1600, Cl		 -		
Check Box(es) that Apply: Promoter Manager	☑ Beneficial Owner	Executive Officer	☑ Director	Executive Officer of
Full Name (Last name first, if individual)				
Gorney, Michael				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		
209 Tenth Avenue South, Suite 333, Na	shville, Tennessee 372	203		<u>. </u>
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	Managing Member
Full Name (Last name first, if individual)				
Shereshevsky, Joseph				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		
999 Waterside Drive, Suite 2220, Norfo	lk, Virginia 23507			
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	Director	Executive Officer of Manager
Full Name (Last name first, if individual)				•
Cohen, Amnon				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		
390 Fifth Avenue, Suite 606, New York	_			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	Manager
Full Name (Last name first, if individual)				
WexTrust Equity Partners, LLC				·
Business or Residence Address	(Number and Street, City	, State, Zip Code)	2 ** ** *	•
333 West Wacker Drive, Suite 1600, Cl	nicago, Illinois 60606			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	Manager
Full Name (Last name first, if individual)	•			
WexTrust Capital, LLC				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		
333 West Wacker Drive, Suite 1600, Cl	nicago, Illinois 60606			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	Officer of Manager
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, City	, State, Zip Code)		

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В.	INFORMA	TION ABO	OUT OFFEI	RING				
1.	Has t	he issuer so	old, or does ti	he issuer inte	end to sell, to	non-accred	ited investor	rs in this offe	ring?			Yes ⊠	No
					Answer al	so in Appen	dix, Column	ι 2, if filing ι	ınder ULOE.				•
2.	What	is the min	imum investr	nent that wil	l be accepted	d from any ir	ndividual?		•••••		•••••	\$100,0	00
3.	3. Does the offering permit joint ownership of a single unit?											Yes ⊠	No □
4.												_	_
			neration for s		•		-	-	•				
			ciated person	_		_							
			dealer. If more				l are associa	ited persons	of such a bro	oker or deal	er, you may		
C.11					i dealer only	·					<u> </u>		<u> </u>
Full	Name	(Last name	e first, if indi	vidual)									
Bus	iness o	r Residenc	e Address		(Number	and Street,	City, State, 2	Zip Code)					
Naп	ne of A	ssociated B	roker or Deale	er .									
State	es in W	hich Persor	Listed Has S	olicited or In	tends to Solid	cit Purchasers	;		_	· - <u>-</u>			
	(Chec	k "All State	s" or check ir	ıdividual Stat	ies)						••••••	☐ All	States
-	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[Hl]	[ID]
	[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	MT] [RI]	[NE] [SC]	[NV] [SD }	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full	Name	·	e first, if indi	viđual)	•				· · · · ·		, ,		
Bus	iness o	r Residence	e Address		. (Number	and Street,	City, State, 2	Zip Code)					
Nam	ne of As	ssociated Br	oker or Deale	r									
State	es in W	hich Person	Listed Has S	olicited or In	tends to Solid	rit Prirchasers	•						
Jun			s" or check in			n i uichascis	•					All	Statue
1		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	, U. A (HI)	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M[]	[MN]	[MS]	[MO]
	MT] RI]	[NE]	[NV]	[NH]	(NJ)	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	•	[SC] (Last name	[SD]	[TN] vidual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Busi	iness o	r Residence	e Address		(Number	and Street, G	City, State, 2	Zip Code)	•				
							3 ,	,					
Nam	ne of As	ssociated Br	oker or Deale	r		· -		•				.,	
State	es in W	hich Person	Listed Has S	olicited or In	tends to Solic	rit Purchasers	<u> </u>	 					
			s" or check in									☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI]	[ID]
	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	MT] RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity (Membership Interests)	\$2,030,000	\$1,685,581.40
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$2,030,000	\$1,685,581.40
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	16	\$1,685,581.40
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.	T 6	D.W. Avv
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	·	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees.		\$
	Printing and Engraving Costs		\$
	Legal Fees	🗵	\$25,000
	Accounting Fees		\$5,000
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)*	🗵	\$ <u>0</u>
	Other Expenses (identify) blue sky filing fees, postage	🗵	\$3,000
	Total	🛛	\$33,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

*The Membership Interests may be sold by third parties retained to promote the offering, which third parties may be paid a fee of up to 10% of the equity raised through the efforts of such third parties. Such fee may be paid, at the sole discretion of the manager, either by the issuer or by the manager and its affiliates.

Question 1 and total expenses	furnished in res	egate offering price given in resp ponse to Part C - Question 4.a. This	difference is the	;		\$1,997,000
5. Indicate below the amount of for each of the purposes show and check the box to the lef	the adjusted grown. If the amount of the estimat	ss proceeds to the issuer used or pront for any purpose is not known, fue. The total of the payments liste set forth in response to Part C - Ques	pposed to be used rnish an estimate d must equal the	! :		
				Payments to Of Directors, a Affiliates	&	Payments to Others
Salaries and fees				\$	_ 🗆	\$
Purchase of real estate and ren	novation			\$	_ 🗵	\$1,330,000_
Purchase, rental or leasing and	l installation of r	nachinery and equipment		\$	_ 🗆	\$
Construction or leasing of plan	nt buildings and	facilities		\$	_ 🗆	\$
Acquisition of other businesse offering that may be used in expursuant to a merger)	xchange for the		\$			
Repayment of indebtedness	***************************************			\$		\$
Working capital			🗵	s	\boxtimes	\$
Other (specify): Real estate as	cquisition fees a	nd costs; capital improvement costs	🛮	\$	_ 🗵	\$664,000
Column Totals			🛛	\$	\boxtimes	\$1,997,000_
Total Payments Listed (colum	n totals added)			\boxtimes	\$1,997,000_	
		D. FEDERAL SIGNAT	TURE			
ollowing signature constitutes	an undertakir	signed by the undersigned duly's g by the issuer to furnish to the y the issuer to any non-accredite	ne U.S. Securit	ies and Excha	inge Commis	sion, upon wri
ssuer (Print or Type)	•	Signature	12	Date	151	
Riverside Investors, LLC		SATOR			1(3107	L
Name of Signer (Print or Type	:)	Title of Signer (Print or Type)		<u> </u>	

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
	(c), (d), (e) or (f) presently subject to any of the disqualification	Yes	No ⊠
	See Appendix, Column 5, for state response.		
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times as	to furnish to any state administrator of any state in which this notice required by state law.	is filed,	notice on
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, informat	ion furnis	hed by the
Limited Offering Exemption (ULOE) of	issuer is familiar with the conditions that must be satisfied to be ent the state in which this notice is filed and understands that the en of establishing that these conditions have been satisfied.		
The issuer has read this notification and know undersigned duly authorized person.	ws the contents to be true and has duly caused this notice to be signed	on its be	half by the
Issuer (Print or Type)	Signature Date 1/2/07		
Riverside Investors, LLC	100		
Name of Signer (Print or Type)	Title of Signer (Print or Type)		

Managing Member

Instruction:

Steve Byers

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a investors	Type of security and aggregate non-accredited vestors in State Part B-Item 1) Type of security and aggregate Offering price offered in state (Part C-Item 1) Type of investor and amount purchased in State (Part C-Item 2)						5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA					,				
со					, Ai				
СТ		X	\$2,030,000 of Preferred Membership Interests	1	\$100,000	0	\$0		X
DE									
DC									
FL.		**.,*	•		i A. Pierce	ŭ.			c
GA									
НІ								<u> </u>	
ID									
IL		x	\$2,030,000 of Preferred Membership Interests	1	\$100,000	0	\$0		x
IN									
IA	<u> </u>								
KS									
KY									
LA									
ME									
MD								<u></u>	

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1		to sell	3 Type of security and aggregate			4		under St	5 lification ate ULOE	
	to non-a	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		amount pu	investor and rehased in State C-Item 2)		(if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MA										
MI										
MN								Ì		
MS						,				
МО										
МТ										
NE										
NV										
NH										
NJ										
NM									,	
NY		X	\$2,030,000 of Preferred Membership Interests	3	\$200,000	0	\$0		X	
NC										
ND										
ОН	-				«.	16.2% L J.L				
ОК										
OR										
PA		X	\$2,030,000 of Preferred Membership Interests	5	\$275,000	0	\$0		X	
RI										
SC	<u> </u>							<u> </u>		
SD										
TN		X	\$2,030,000 of Preferred Membership Interests	1	\$10,581.49	0	\$0		X	
TX										
UT										
VT										

1	Intend to non-ac investors	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	,	4 Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
VA		X	\$2,030,000 of Preferred Membership Interests	3	\$450,000	0	\$0		X
WA			1						
wv									
WI		X	\$2,030,000 of Preferred Membership Interests	1	\$500,000	0	\$0		X
WY									
PR									,